IMPORTANT NOTICE TO APPLICANT: Make check for the total Processing Fee Payable to: Number of Sites: D.R.E.R D.E.R.M. PRINT		FOR OFFICIAL Agenda Date: Waiver No. D Received Date:	7/29/2014
Concurrency Review Fee (*6.00% of Sub-Total) AMOUNT FOR WAIVER OUTSIDE MUNICIPALITIES=>		t applicable within Munic ==AMOUNT FOR WAIVER WITHII	ipalities NUNINCORPORATED MIAMI-DADE COUNTY
APPLICATION	N FOR W	AIVER OF	PLAT
Municipality: NORTH MIAMI Sec.: 2	9_Twp.: <u>52</u> S. I	Rge.: <u>42</u> E. / Sec.:	Twp.:S. Rge.:E.
Owner's Name: MKR Properties LLC	East Coast Rally	Phone: 30	05-216-4324
Address: 475 10 Ave. 2nd Floor	City: New York	State: NY	Zip Code: 10018
Owner's Email Address: bo@sir-usa.com		he and other and	
2. Surveyor's Name: Hadonne Corp.	es, more or less,		(305) 266-1188
Address: 1985 NW 88th Ct. Suite 201	City: Doral	State: FL	Zip Code: <u>33174</u>
Surveyor's Email Address: ahadad@hadonne.com			
3. Legal Description of Cutout Tract: See Attached Exh	nibit "A"	nd.	
5. Legal Description of Parent Tract: See Attached Exh. 6. Street boundaries: NE 14th Ave & NW 122 Street 7. Present Zoning: M-1 Zoning	hibit "A" Hearing No.:	way Right-of-Way. Le ndred and eighty fee v calculations.	ss the North 20 feet of t; and also less the East
8. Proposed use of Property: Single Family Res.(Units), Duplex(Units), Business(52,486 Sq. Ft.), Office(Sq. Ft.), Res	Apartments(Staurant(S	_ Units), Industrial/Ware q. Ft. & No. Seats), C	house(Square .Ft.), Other (Sq. Ft. & No. of Units _
NOTE: Attach list of all restrictions zoning conditions or any I HEREBY CERTIFY that I am the owner of the parcel(s) described in Item 5 ar belief. If applicable, attached is a list of all the restrictions/restrictive covenants acquisition of this land. In addition, I agree to furnish additional items as may be	nd that the information co	ontained in this application is true	ue and correct to the best of my knowledge and ned is a copy of the recorded deed showing my
Furthermore, I am aware that the use of a public water supply and/or public several for the extension of these utilities must be approved by the appropriate utility	wer system may be requirentity and by D.R.E.R. p	red for this development. If so orior to the approval of the wai	required, I recognize that engineering drawings ver of plat.
Pursuant to Florida Statutes 837.06, whoever knowingly makes a false sta shall be guilty of a misdemeanor of the second degree, punishable as p	atement in writing with provided in FS. 775.082	the intent to mislead a public or FS. 775.083.	servant in the performance of his or her duty
STATE OF FLORIDA)	os museo os less.	Krb-	ut n Holt
COUNTY OF MIAMI-DADE)	Signature of (Print name & Titl	Polo	urt Holst member
BEFORE ME, personally appeared Respect to and before me that (he/she) executed as identification and	d the same for th	his 9 day of Jun e purposed therein. F	e2016 A.D. and (he/she) Personally known or produce
WITNESS my hand and seal in the County and State la	ast aforesaid this	ath day of Ju	me ,2016 A.D.
PETER C. OBERLINK Notary Public, State of New York No. 010B5025313 Qualified in New York County Commission(NQTARY SEAL)201		e name here: April 28, 2 (Commission Ex	

erse side of this sheet may be used for a statement of additional items you may wish considered.

